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STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER: THE HIGHMORE HERALD		2. DATE: 9/15/16
3. FREQUENCY OF ISSUE: WEEKLY	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 52	3B. ANNUAL SUBSCRIPTION PRICE: $26 In-state $29 Out-of-State

4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers)
211 IOWA AVENUE SW, HIGHMORE, HYDE, SD 57345-0435

5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers)
P.O. BOX 435, HIGHMORE, SD 57345-0435

6. FULL NAME OF PUBLISHER: MARY ANN MORFORD

7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.

FULL NAME	COMPLETE MAILING ADDRESS
MARY ANN MORFORD	PO BOX 435, HIGHMORE, SD 57345-0435

8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	1400	1400
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, and counter sales.	132	124
2. Mail Subscription (Paid and or requested)	860	847
3. Paid Electronic Copies	0	0
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	992	971
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	42	42
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1034	1013
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	338	351
2. Return from News Agents	28	36
G. TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)	1400	1400

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Mary Ann Morford
(Signature)

Owner/Publisher
(Title)

State of South Dakota)
§
County of HYDE)

Sworn to before me this 15 day of Sept., 20 16

Mary E Hamli
Notary Public

My commission expires: July 8, 2022

(Seal)